AMENDED IN ASSEMBLY JANUARY 4, 2010

CALIFORNIA LEGISLATURE—2009–10 REGULAR SESSION

ASSEMBLY BILL

No. 259

Introduced by Assembly Member Skinner

February 11, 2009

An act to amend Section 1367.695 of the Health and Safety Code, and to amend Section 10123.84 of the Insurance Code, relating to health eare coverage. An act relating to school safety.

LEGISLATIVE COUNSEL'S DIGEST

AB 259, as amended, Skinner. Health care coverage: certified nurse-midwives: direct access. School safety.

Existing law, the Field Act, requires school buildings, as defined, to meet various safety specifications. Existing law makes each school district and county office of education responsible for the overall development of comprehensive school safety plans for their schools operating kindergarten and any of grades 1 to 12, inclusive.

This bill would state the Legislature's intent to enact legislation that would require each school district and county office of education maintaining kindergarten and any of grades 1 to 12, inclusive, to biannually complete a campus safety assessment, as specified, for the purpose of identifying potential health and safety issues in school buildings and on school grounds.

Existing law, the Knox-Keene Health Care Service Plan Act of 1975, provides for the licensure and regulation of health care service plans by the Department of Managed Health Care and makes a willful violation of that act a crime. Existing law provides for the regulation of health insurers by the Department of Insurance.

AB 259 -2-

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Existing law requires a health care service plan contract or health insurance policy to allow an enrollee or policyholder the option to seek obstetrical and gynecological physician services directly from an obstetrician and gynecologist or a family practice physician and surgeon, subject to specified provisions established by the plan or insurer.

This bill would additionally require a health care service plan contract or health insurance policy to allow an enrollee or policyholder the option to seek obstetrical and gynecological services from a certified nurse-midwife, as specified. The bill would specify that a violation of this requirement with respect to health care service plans shall not be a crime. The bill would also make other conforming changes and would delete certain obsolete language.

Vote: majority. Appropriation: no. Fiscal committee: no. State-mandated local program: no.

The people of the State of California do enact as follows:

SECTION 1. It is the intent of the Legislature to enact legislation that would require each school district and county office of education maintaining kindergarten and any of grades 1 to 12, inclusive, to biannually complete a campus safety assessment by local law enforcement and health departments for the purpose of identifying potential health and safety issues in school buildings and on school grounds.

SECTION 1. Section 1367.695 of the Health and Safety Code is amended to read:

1367.695. (a) The Legislature finds and declares that the unique, private, and personal relationship between women patients and their obstetrical and gynecological providers warrants direct access to obstetrical and gynecological services.

- (b) Commencing January 1, 2010, every health care service plan contract issued, amended, renewed, or delivered in this state, except a specialized health care service plan contract, shall allow an enrollee the option to seek obstetrical and gynecological services directly from any of the following health care providers, provided that the services fall within the scope of practice of that provider:
- (1) A participating obstetrician and gynecologist.
- (2) A participating certified nurse-midwife.

-3- AB 259

(3) A participating family practice physician and surgeon designated by the plan as providing obstetrical and gynecological services.

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- (c) In implementing this section, a health care service plan may establish reasonable provisions governing utilization protocols and the use of obstetricians and gynecologists, certified nurse-midwives, or family practice physicians and surgeons, as provided for in subdivision (b), participating in the plan network, medical group, or independent practice association, provided that these provisions shall be consistent with the intent of this section and shall be those customarily applied to other physicians and surgeons, such as primary care physicians and surgeons, to whom the enrollee has direct access, and shall not be more restrictive for the provision of obstetrical and gynecological services. An enrollee shall not be required to obtain prior approval from another physician, another provider, or the health care service plan prior to obtaining direct access to obstetrical and gynecological services, but the plan may establish reasonable requirements for the participating obstetrician and gynecologist, certified nurse-midwife, or family practice physician and surgeon, as provided for in subdivision (b), to communicate with the enrollee's primary care physician and surgeon regarding the enrollee's condition, treatment, and any need for followup care.
- (d) This section shall not be construed to diminish the provisions of Section 1367.69.
- (e) Notwithstanding Section 1390, a violation of this section, as it related to direct access to nurse-midwives, the amendments made to this section by the act adding this subdivision shall not be a crime.
- SEC. 2. Section 10123.84 of the Insurance Code is amended to read:
- 10123.84. (a) The Legislature finds and declares that the unique, private, and personal relationship between women patients and their obstetrical and gynecological providers warrants direct access to obstetrical and gynecological services.
- (b) Commencing January 1, 2010, every policy o health insurance that is issued, amended, delivered, or renewed in this state shall allow a policyholder the option to seek obstetrical and gynecological services directly from any of the following health

AB 259 —4—

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care providers, provided that the services fall within the scope of
practice of that provider:

- (1) An obstetrician and gynecologist.
- (2) A certified nurse-midwife.
- (3) A participating family practice physician and surgeon designated by the insurer as providing obstetrical and gynecological services.
- (c) In implementing this section, an insurer may establish reasonable provisions governing utilization protocols and the use of obstetricians and gynecologists, certified nurse-midwives, or family practice physicians and surgeons, as provided for in subdivision (b), provided that these provisions shall be consistent with the intent of this section and shall be those customarily applied to other physicians and surgeons, including primary care physicians and surgeons, to whom the policyholder has direct access, and shall not be more restrictive for the provision of obstetrical and gynecological services. A policyholder shall not be required to obtain prior approval from another physician, another provider, or the insurer prior to obtaining direct access to obstetrical and gynecological services, but the insurer may establish reasonable requirements for the participating obstetrician and gynecologist, the certified nurse-midwife, or the family practice physician and surgeon, as provided in subdivision (b), to communicate with the policyholder's primary care physician regarding the policyholder's condition, treatment, and any need for followup care.
- (d) This section shall not be construed to diminish the provisions of Section 10123.83.